

CITY OF BROKEN ARROW, OKLAHOMA FIRST RESPONDER PERMIT APPLICATION

RETURN TO: City of Broken Arrow Development Services
PO Box 610
Broken Arrow, OK 74013

Residence/Business Name _____
Address of alarmed property _____
Billing Name if Different _____ Phone # _____
Billing Address _____ Other Phone # _____
Billing City _____ State _____ Zip _____

ALARM COMPANY INFORMATION

OKLAHOMA LICENSE NO. _____

ALARM COMPANY NAME _____ PHONE _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____

PLEASE LIST ALARM MONITORING COMPANY IF DIFFERENT FROM ALARM INSTALLATION COMPANY

OKLAHOMA LICENSE NO. _____

ALARM COMPANY NAME _____ PHONE _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____

CONTACT INFORMATION

#1) NAME _____ PHONE _____
ADDRESS _____ OTHER PHONE # _____

#2) NAME _____ PHONE _____
ADDRESS _____ OTHER PHONE # _____

#3) NAME _____ PHONE _____
ADDRESS _____ OTHER PHONE # _____

1. PERMIT FEE IS \$24.00 FOR EACH PERMIT ISSUED. DUE UPON RECEIPT.
2. PERMITS ARE EFFECTIVE FOR ONE PERMIT YEAR, OCTOBER 1ST THROUGH SEPTEMBER 30TH.
3. RENEWAL FEE IS \$10.00

PERMIT NO. _____
DATE ISSUED _____
EXPIRATION _____

AUTHORIZED SIGNATURE OF APPLICANT